

# USE THIS FORM FOR ALL ENTRIES EXCEPT CRAFTS

THE CLEVELAND MUSEUM OF ART  
**FORTY-EIGHTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE**  
 APRIL 20 to MAY 22, 1966

Born in Cleveland ☒ YES ☐ NO  
 Entered Previous May Shows? ☒ YES ☐ NO

PLEASE  
 LETTER  
 PLAINLY  
 OR TYPE

Collaborator in any \_\_\_\_\_

Artist

SIGMUND

SHAWKEY

Address

1248 WOODWARD AVE, AKRON 44310

SUMMIT

WA 3-4107

NO.

STREET

CITY

ZIP CODE

COUNTY

Out-of-town residents should state whether return shipment is required. ☐ YES ☒ NO

Please bring Registration Fee of \$2.00 (Check or Money Order) with your entries.

CLASS 1	MEDIUM OIL COLLAGE	CLASS 1	MEDIUM OIL COLLAGE	CLASS 1	MEDIUM W.C. COLLAGE
TITLE UNTITLED NO.3		TITLE VIETNAM NO.1		TITLE VIETNAM NO.2	
NUMBER FOR SALE 1	NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE 400 <sup>00</sup>	NUMBER FOR SALE 1	NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE 400 <sup>00</sup>
Artist SIGMUND SHAWKEY			Artist SIGMUND SHAWKEY		
FIRST NAME LAST NAME			FIRST NAME LAST NAME		
ACCEPTED BY	ACCEPTED BY	ACCEPTED BY	ACCEPTED BY	ACCEPTED BY	ACCEPTED BY
REJECTED	REJECTED	REJECTED	REJECTED	REJECTED	REJECTED
DO NOT WRITE IN THIS SECTION 1268			DO NOT WRITE IN THIS SECTION 1269		

This entry blank must be fully made out (typewritten or plainly lettered for catalog purposes) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 2, 1966.

It is also understood that accepted entries will remain on exhibition until May 22 1966.

The submission of entries will be construed as acceptance of all conditions printed in this entry blank.

*[Signature]*

SIGNATURE

RETURN DATES FOR OBJECTS - Monday through Saturday 9 a.m. - 4:45 p.m. at Museum Service Entrance

**SUBMIT ENTRIES WITH ENTRY BLANK AND FEE FEBRUARY 26 THROUGH MARCH 5, 1966.**

Submit one entry blank in triplicate per person. One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection. THIS COPY IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This form in duplicate is made up of N C R paper which does not require carbon.

REJECTED: April 23 - May 7

ACCEPTED: May 27 - June 11



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CL ASS <b>POSTER</b>	MEDIUM <b>COLLAGE</b>	CL ASS	MEDIUM	CL ASS	MEDIUM	
TITLE <b>POSTER</b>		TITLE		TITLE		
NUMBER FOR SALE	NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE	NUMBER FOR SALE	NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE	
Artist <b>SIGMUND SHAWKEY</b> FIRST NAME LAST NAME			Artist <b>SIGMUND SHAWKEY</b> FIRST NAME LAST NAME			
ACCEPTED BY	ACCEPTED BY	ACCEPTED BY	REJECTED	ACCEPTED BY	ACCEPTED BY	
DO NOT WRITE IN THIS SECTION			1078	DO NOT WRITE IN THIS SECTION		

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paid for paper  
March 5